· .	3	,	U.S. Pate ons are required to respond to a c	ent and Trademark Offi	ce; U.S. DEPARTMENT OF nless it displays a valid OMB		
Orre to	market	tuction Act of 1995, no person	TIME UNDER 37 CF	R 1.136(a)	Docket Number (C ALBRE-20	Optional)	
TITION	FORE	EXTENSION OF	In re Application of				
			Application Number		Filed November	24, 1999	
			For HUMAN CD28 SPECIFIC MONOCLONAL ANTIBODIES			DDIES	
	Group Art Unit Examiner						
			1644 Jessica H. Roark				
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.							
respons	se in the	above identified ap	oplication.	n, foo are as follo	OWS	l	
The red (check	juested time per	extension and appr riod desired):	opriate non-small-enti	ty lee are as rom			
		One month (37 CFF	R 1.17(a)(1))		\$		
		Two months (37 CF	R 1.17(a)(2))		\$	0.00	
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		Four months (37 C				1	
		Five months (37 C	FR 1.17(a)(5))		\$		
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-3402.  I have enclosed a duplicate copy of this sheet.  I am the ☐ applicant/inventor.  ☐ assignee of record of the entire interest. See 37 CFR 3.71  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  ☐ attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a).  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							4 2003
			_		Place W	anth	1
_		February 27, 200	Blest 2. W'asly Signature			1	
		Date			Robert E. McCa		1
Typed or printed name							1
NOTE: Sig	natures o	f all the inventors or assigne signature is required,	nees of record of the entire see below*.	interest or their repre	sentative(s) are required.	Submit multiple	]
TO *Tot		forms are submitte	d				_

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete that form should be sent to the Chief Information Officer, U.S. Patent and Trademark. Office, Washington, D.C. 2023. TO A NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, D.C. 2023.